

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

FLECTION DEPT. SUMERVILLE, MA

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le with: ity or Tow	n Clerk or Election Co	ommission Plea	se print or typ	e all informat	ion, except signa	tures. 20	11 JAN 20 F	⊃ : 0
	dates: ting Period Begini	ming /	Date	Year 10	Ending	Month 12	Date 31	Year /6
	of report: (Check day preceding prel		day preceding	gelection	30 day after elec	tion 🖂	/ear-end report	□dissolution
1(Aldern Brown	Sought and District	617-625-9		Saws d Name of L. Brown	committee N Committee	Name Treasurer Cd. g Address 47 (1762	T-9(16)
	Line 2: Line 3: Line 4: Line 5:	Ending bala Total receip Subtotal (line Total expen Ending bala	ance from ots this pe e I plus line 2 ditures the ance (line 3	n previous eriod (page t) his period minus line 4)	2, line 11) I (page 3, line 14	\$ <u>2</u> \$ <u>2</u> \$ <u>2</u> \$ <u>2</u>	154.96	
	Line 7:	Total in-kind Total (all) ou Name of ban	itstanding	liabilities	(page 4)		<u>2' 151 ∞</u> <u>0</u>	_
I certify to campaign and represent. C. C.	t of Committee Treasichat I have examined to finance activity, inclusions the campaign fit 53 cr's signature (in ink)	this report including a uding all contribution names activity of all	s, loans, receipts, Sorsons acting ur ted under the pe	, expenditures, di nder the authority nalties of perjur	sbursements, in-kind or on behalf of thi	contributions committee	ns and liabilities for in accordance with Date	r this reporting period
I Candi I certify t campaign have not i Candi I certify t campaign	t of Candidate: (checidate with Committee that I have examined to finance activity, of received any contributidate without Commithat I have examined to finance activity, inclusions the campaign fin. 55.	e and no activity inde this report including a all persons acting un- tions, incurred any lial ittee <u>OR</u> Candidate w this report including a luding contributions, I nance activity of all p	attached schedule der the authority bilities nor made vith independen attached schedule loans, receipts, e	es and it is, to the or on behalf of any expenditures tactivity filing sees and it is, to the expenditures, disbuter the authority	this committee in ac on my behalf during eparate report e best of my knowled ursements, in-kind or or on behalf of this	cordance wi this reporting tge and belief contributions committee in	th the requirements ig period. of, a true and comp and liabilities for t	s of M.G.L. c. 55. I slette statement of all this reporting period
Candidat	te signature (in ink)						Date	

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more		
		`				
-						
		•				
			· 			
				· ·		
Line 9: T	otal receipts in excess of \$50 (or listed above)					
	otal receipts \$50 and under* (not listed above)		37			
Line 11: TOTAL RECEIPTS IN THE PERIOD				Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
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-					
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			_		
				,	
		Line 12: I	Expenditures over \$50		
		Line 13: I	Expenditures \$50 and under*		
E	Enter on page 1, line 4	Line 14:7	TOTAL EXPENDITURES	0	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date From Whom Received* Received		Residential Address Description of Contribution	Value
-			
			-
		Line 15: In-kind over \$50	
		Line 16: In-kind \$50 and under	,
	Enter on page 1, line 6	Line 17: Total In-kind	. 0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Previous Reports	William A. White Ir.	16 Browning Rd. Somprulli. MA 02141	Candidity Loans	85.424.00
 .				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	85,424.00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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